

Fig. 1

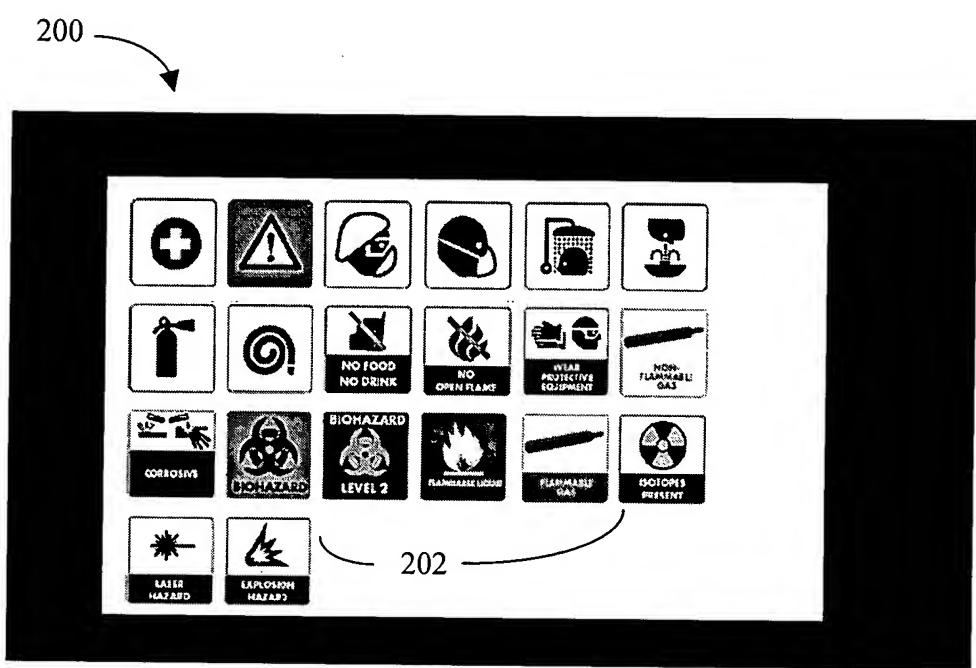


Fig. 2

300

Current Signs for Consolidated Materials

SIGN DATABASE

SEARCH

MANAGE EACH CITIES MANAGEMENT SYSTEM

BOOM IDENTIFICATION 302

HAZARD BIOCERAMICS 304

PRECAUTIONARY 306

HAZARD PICTOGRAMS		NFPA		SPECIAL PPE		DATE MODIFIED	
Building	Room	Name	1	2	3	4	5
Edif.	COX 1210	Computer Room	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Kevlar Over
Edif.	COX 1211	Computer Room	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12/05/01
Edif.	COX 1212	Computer Room	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12/05/01
Edif.	COX 1213	Computer Room	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12/05/01
Edif.	COX 1214	Computer Room	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12/05/01
SPECIAL		Special Reactivity		3	3	1	CX
Health		Human Tissue		2	2	2	
Corrosive		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Laser		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
VFlam Gas		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Flam Gas		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Flam Liquid		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Oxidizer		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Flam Solid		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Cancer Haz		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Radiation		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Biohazard Level		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Biohazard		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

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Fig. 3

400
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Facility Information															
<input type="button" value="VIEW DATABASE"/> <input type="button" value="FACILITIES REPORTING"/> <input type="button" value="MANAGE PERSONNEL"/> <input type="button" value="SEARCH"/>															
Laboratory Name <input type="text"/> Room Number <input type="text"/> Building <input type="text"/> Emergency Contact #1 <input type="text"/> Dr. Fryburn <input type="button" value="▼"/> Emergency Contact #2 <input type="text"/> Dr. Fryburn <input type="button" value="▼"/> Emergency Contact #3 <input type="text"/> Dr. Fryburn <input type="button" value="▼"/> Security # <input type="text"/> Fire/Paramedic # <input type="text"/> EH&S # <input type="text"/>															
PRIMARY HAZARDS <input type="checkbox"/> Radiation <input type="checkbox"/> Biohazard <input type="checkbox"/> Biohazard Level <input type="checkbox"/>															
SECONDARY HAZARDS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Biohazard <input type="checkbox"/></td> <td style="width: 25%;">Cancer Hazard <input type="checkbox"/></td> <td style="width: 25%;">Flammable Liquid <input type="checkbox"/></td> <td style="width: 25%;">Laser <input type="checkbox"/></td> </tr> <tr> <td>Biohazard Level <input type="checkbox"/></td> <td>Flammable Solid <input type="checkbox"/></td> <td>Flammable Gas <input type="checkbox"/></td> <td>Corrosive <input type="checkbox"/></td> </tr> <tr> <td>Radiation <input type="checkbox"/></td> <td>Oxidizer <input type="checkbox"/></td> <td>Non-Flammable Gas <input type="checkbox"/></td> <td>OTHER <input type="text"/></td> </tr> </table>				Biohazard <input type="checkbox"/>	Cancer Hazard <input type="checkbox"/>	Flammable Liquid <input type="checkbox"/>	Laser <input type="checkbox"/>	Biohazard Level <input type="checkbox"/>	Flammable Solid <input type="checkbox"/>	Flammable Gas <input type="checkbox"/>	Corrosive <input type="checkbox"/>	Radiation <input type="checkbox"/>	Oxidizer <input type="checkbox"/>	Non-Flammable Gas <input type="checkbox"/>	OTHER <input type="text"/>
Biohazard <input type="checkbox"/>	Cancer Hazard <input type="checkbox"/>	Flammable Liquid <input type="checkbox"/>	Laser <input type="checkbox"/>												
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Radiation <input type="checkbox"/>	Oxidizer <input type="checkbox"/>	Non-Flammable Gas <input type="checkbox"/>	OTHER <input type="text"/>												
NFPA DIAMOND <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">HEALTH <input type="checkbox"/></td> <td style="width: 25%;">FIRE <input type="checkbox"/></td> <td style="width: 25%;">REACTIVITY <input type="checkbox"/></td> <td style="width: 25%;">SPECIAL <input type="checkbox"/></td> </tr> </table>				HEALTH <input type="checkbox"/>	FIRE <input type="checkbox"/>	REACTIVITY <input type="checkbox"/>	SPECIAL <input type="checkbox"/>								
HEALTH <input type="checkbox"/>	FIRE <input type="checkbox"/>	REACTIVITY <input type="checkbox"/>	SPECIAL <input type="checkbox"/>												
GENERAL WARNINGS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">No Food/No Drink <input type="checkbox"/></td> <td style="width: 25%;">Wear Safety Glasses <input type="checkbox"/></td> <td style="width: 25%;">Wear Hardhat <input type="checkbox"/></td> <td style="width: 25%;">Wear Booties <input type="checkbox"/></td> </tr> <tr> <td>Wear Gloves <input type="checkbox"/></td> <td>Wear Lab Coat <input type="checkbox"/></td> <td>Beard/Mustache Cover <input type="checkbox"/></td> <td>Other <input type="text"/></td> </tr> </table>				No Food/No Drink <input type="checkbox"/>	Wear Safety Glasses <input type="checkbox"/>	Wear Hardhat <input type="checkbox"/>	Wear Booties <input type="checkbox"/>	Wear Gloves <input type="checkbox"/>	Wear Lab Coat <input type="checkbox"/>	Beard/Mustache Cover <input type="checkbox"/>	Other <input type="text"/>				
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Wear Gloves <input type="checkbox"/>	Wear Lab Coat <input type="checkbox"/>	Beard/Mustache Cover <input type="checkbox"/>	Other <input type="text"/>												
CLIPBOARD <div style="border: 1px solid black; height: 40px; margin-top: 10px;"></div>															
<input type="button" value="VIEW SIGN"/>		<input type="button" value="SAVE SIGN"/>													
<input type="button" value="SAVE AND PRINT"/>															

Fig. 4

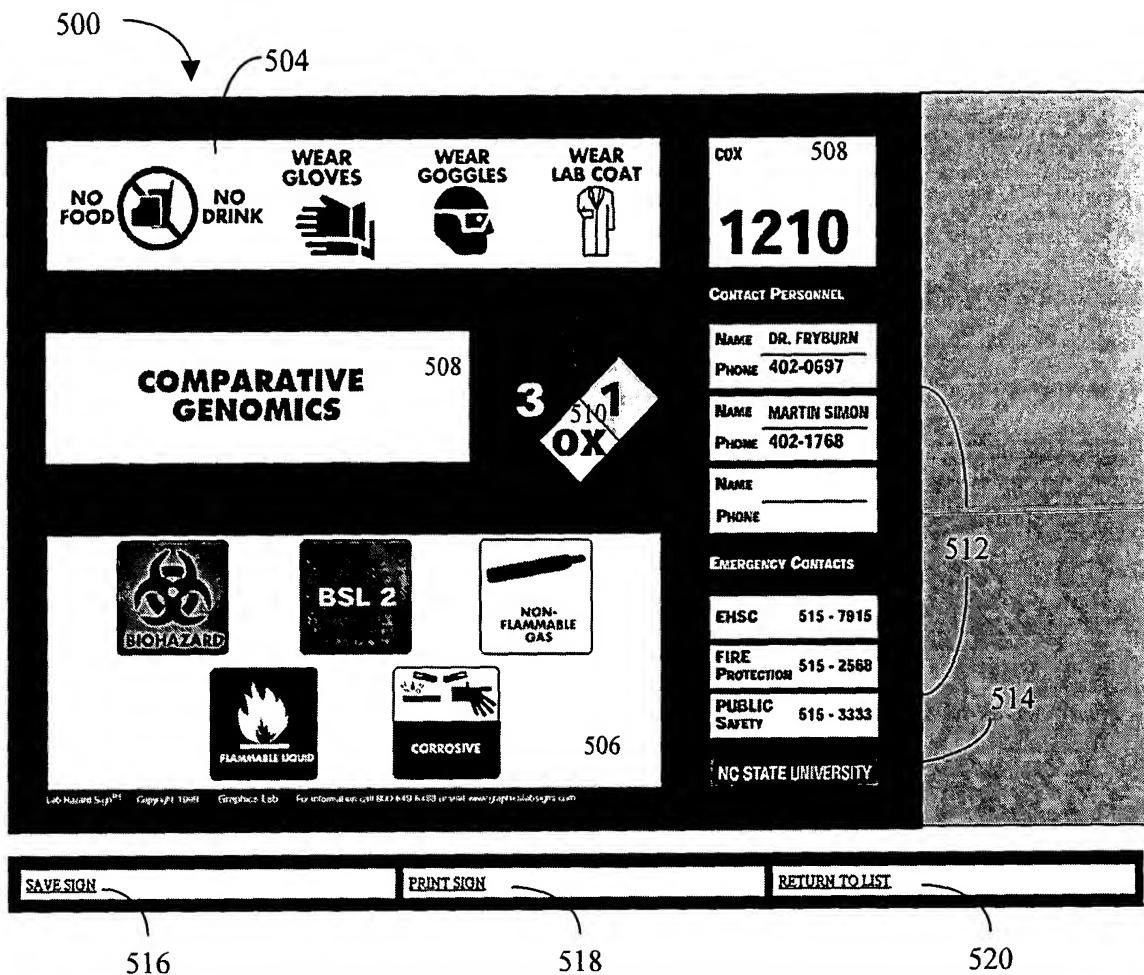


Fig. 5

600

SEARCH FORM

SIGN DATABASE

SEARCH

MANAGE FACILITIES

MANAGE PERSONNEL

Search For:

GO

Search By: Personnel

Building

Lab Name

Room Number

Personnel

Hazard

Warning

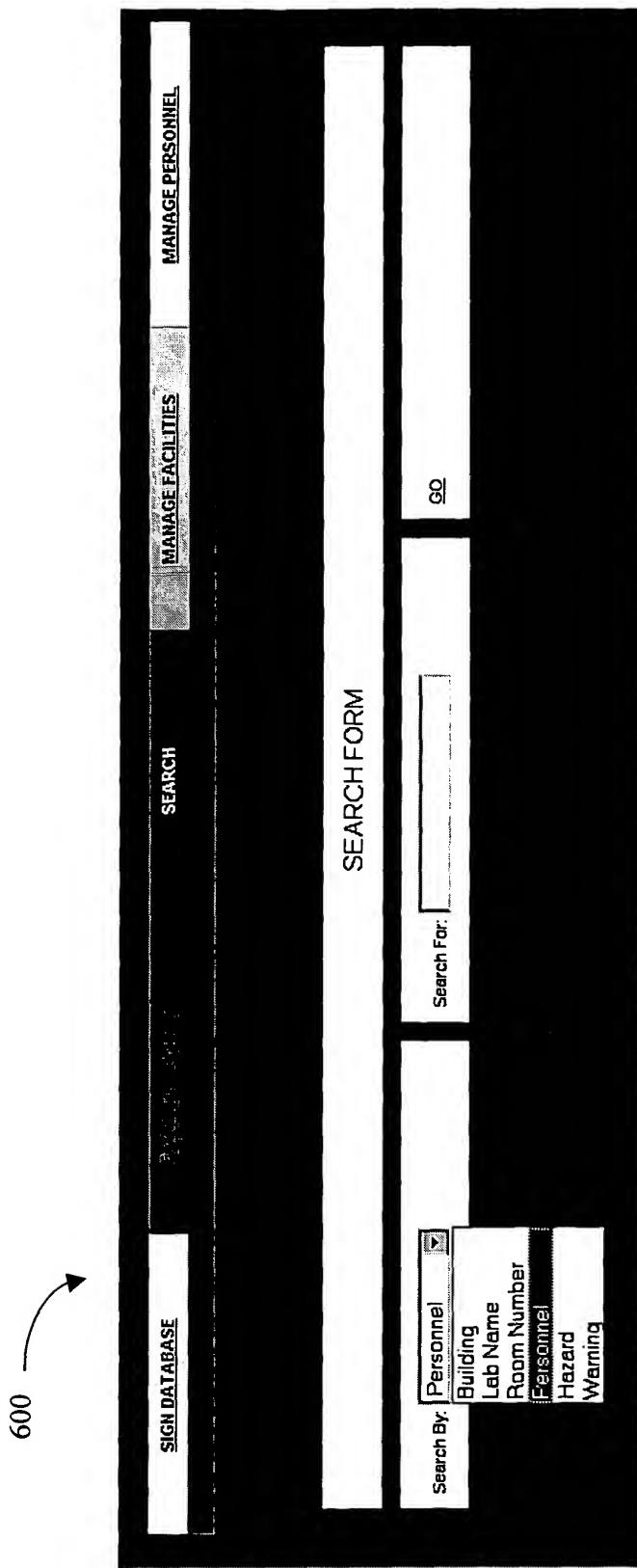
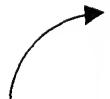


Fig. 6

700



MANAGE EMERGENCY PERSONNEL	
NAME	Office Telephone Number
Dr. Fryburn	404-855-8777
Ellen Fitzpatrick	405-356-3866
Ellen Kay	404-768-4322
Gary Barnes	402-0797
John Yee	402-1779
Jonah Pfeiric	404-465-4322
Marilyn Chu	404-788-5656
Martin Simon	404-211-4322

SEARCH FACILITIES REPORT MANAGE FACILITIES MANAGE PERSONNEL

Add Profile **Edit Profile** [Dr. Fryburn] **Delete Profile** [Dr. Fryburn] **Finish**

Dr. Fryburn
Martin Simon
John Yee
Ellen Kay
Jonah Pfeiric
Ellen Fitzpatrick
Marilyn Chu
Gary Barnes

Fig. 7

800 →

Consolidated Materials - All Rooms			
Building	Security Phone	EHS Phone	Fire Phone
Headquarters	404-873-9657	312-755-4716	911
Building 19	404-873-2777	312-755-4716	911
Cox	543-209-3213	987-987-6657	911

Facilities Editor

SEARCH

FACILITIES REPORT

SIGN DATABASE

MANAGE FACILITIES

MANAGE PERSONNEL

Address

245 Church Drive
Glen Valley, NC
43882

45 Campus Drive
Glen Valley, NC
43882

22 Neerfoot Lane
Glen Valley, NC
43882

Update Cancel

Fig. 8

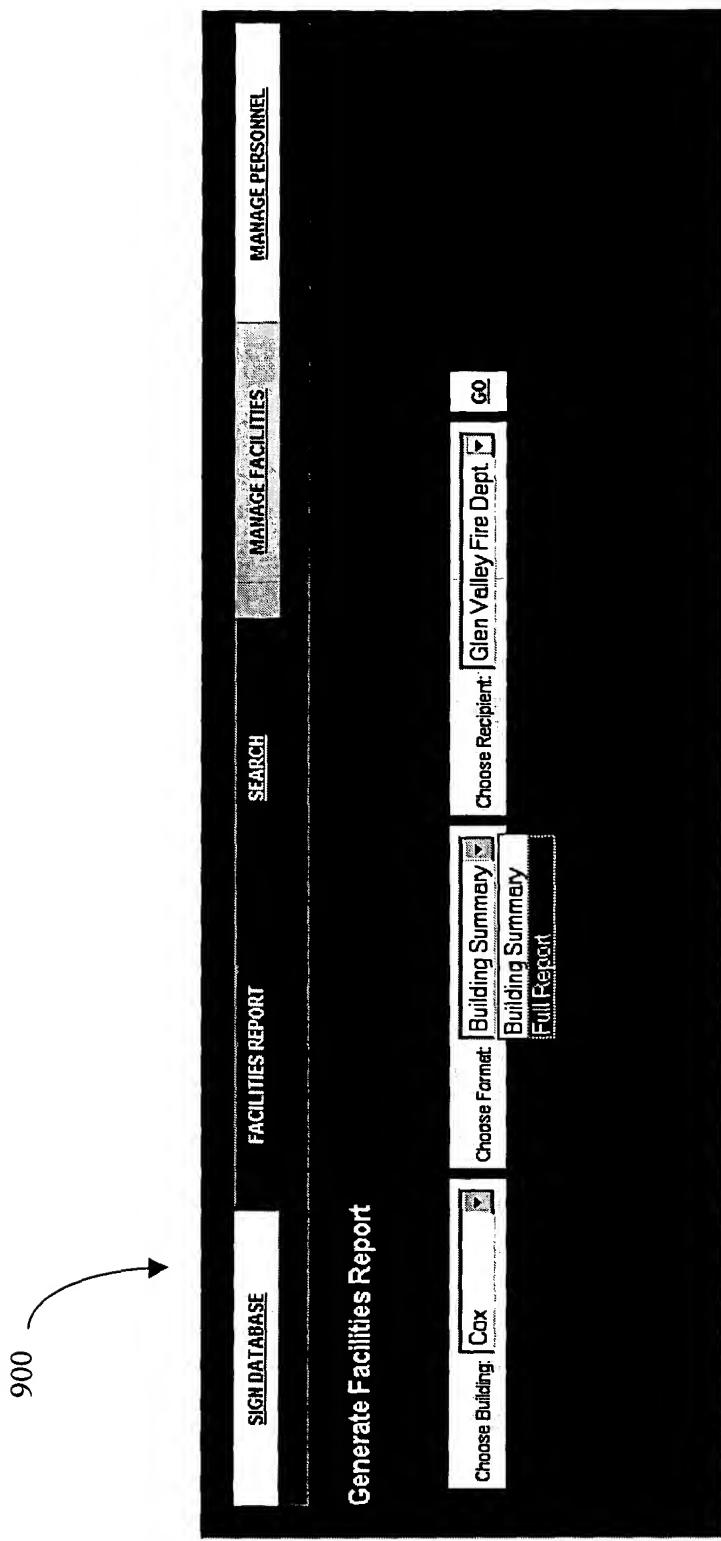


Fig. 9